

**CALIFORNIA HAZARDOUS WASTE MANIFEST**  
 State Department of Health Services  
**HAZARDOUS MATERIALS MANAGEMENT SECTION**  
 744 P Street, Sacramento, CA 95814

1 Manifest Number **139 00914**  
 4 Alternate TSD Facility Name **38460**

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)  
 Name **Doublet Waste Co** EPA # **10151101005**  
 Address **1700 26th Street** Phone **268-3137**  
 City, State, Zip **Vernon, CA 90023**

U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS	NUMBER OF CONTAINERS
WASTE <b>HAZARDOUS WASTE</b>	<b>11</b>	<b>NA</b>	<b>500</b>	<b>DRUMS</b>	<b>1</b>
WASTE				<b>BAGS</b>	
				<b>TANK TRUCK</b>	
				<b>DUMP TRUCK</b>	
				<b>OTHER</b>	

6 Waste Category **90** 7 Ext. Haz. Waste Permit No. **113** 8 Generating Process **HAZARDOUS WASTE**

9 A. **HAZARDOUS** CONCENTRATION RANGE LOWER **40** UPPER **90** UNITS  %  ppm.  
 B. **HAZARDOUS** CONCENTRATION RANGE LOWER **40** UPPER **90** UNITS  %  ppm.  
 C.  %  ppm.  
 D.  %  ppm.

10 WASTE PROPERTIES: pH **7.0**  Toxic  Flammable  Corrosive/Irritant  Reactive  Non-Hazardous Material  %  
 11 PHYSICAL STATE:  Solid  Liquid  Sludge  Slurry  Gas  Other  
 12 SPECIAL HANDLING INSTRUCTIONS:  Gloves  Goggles  Respirator  Other **HAZARDOUS WASTE**

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.**

13 Signature of Authorized Agent and Title **James M. ...** Date Shipped **6 MAY 83**  
 14 TRANSPORTER NAME **J. C. Incorporated** 15 PICK-UP DATE **05 08 1983**  
 ADDRESS **26th Street** PHONE **(213) 268-3137** EPA NO. **CIA D 0 5 8 0 1 8 3 6 7** Time **1:00**  AM  PM  
 CITY, STATE, ZIP **Vernon, CA 90023** 16 Signature of Authorized Agent and Title **...** Date **6 MAY 83**

17 NAME **TSD FACILITY** (FACILITY-OPERATOR MUST COMPLETE)  
 18 QUANTITY (If Measured) \_\_\_\_\_ 19 STATE FEE (If Any) \_\_\_\_\_  
 EPA NO. \_\_\_\_\_ PHONE NO. \_\_\_\_\_  
 20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:  
 Surface Impoundment  Landfill  
 Injection Well  Land Treatment  
 Treatment (Specify) \_\_\_\_\_  
 Recovery or Re-use  Storage/Transfer  
 Recycle  
 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:  
 22 Designated TSD Facility Name \_\_\_\_\_ EPA NO. \_\_\_\_\_ Date Accepted \_\_\_\_\_

**INSTRUCTIONS FOR COMPLETING MANIFEST**  
**Type or print clearly. Press Hard. Illegible or Incomplete man**

**Items will be returned to you by the State for clarification.**

Generator: Provide your telephone number: \_\_\_\_\_  
**Item 1:** Before filling out the manifest, a manifest number shall be written or printed on the manifest. The number may be provided by the transporter. Indicate the number of different wastes in shipment. If one manifest cannot adequately describe the shipment, use a separate manifest for each different waste type and DOT SHIPPING NAME.

**Item 2-4:** Provide the complete names, addresses, and EPA I.D. numbers of the generator and designated TSD facilities. If you are a small generator and have no EPA I.D. number, write "small generator" in EPA No. Space.  
**Item 5:** Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

**Item 6:** Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. [Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution."] If none of the listed categories adequately identify your waste, describe the wastes.

- |                            |                          |                                  |
|----------------------------|--------------------------|----------------------------------|
| 1. Acid Sludge             | 26. Drugs                | 51. Pesticide containers         |
| 2. Acid solution           | 27. FCC waste            | 52. Pesticide rinse water        |
| 3. Adhesive                | 28. Filter cake          | 53. Phenolic waste               |
| 4. Alkaline sludge         | 29. Filters, spent       | 54. Photoprocessing waste        |
| 5. Alkaline solution       | 30. Flux                 | 55. Plating sludge               |
| 6. Alkali solids           | 31. Fly ash              | 56. Plating solution, acid       |
| 7. Alum sludge             | 32. Gasoline & water     | 57. Plating solution, alkaline   |
| 8. API separator sludge    | 33. Glaze sludge         | 58. Polychlorinated biphenyls    |
| 9. Asbestos solids         | 34. Glue                 | 59. Resin water                  |
| 10. Asbestos sludge        | 35. Hair pulp            | 60. Scrubber sludge              |
| 11. Ashes                  | 36. Heavy metal solution | 61. Scrubber solution            |
| 12. ASD filter cake        | 37. Heavy metal sludge   | 62. Soap                         |
| 13. Baghouse waste         | 38. Ink & solvent        | 63. Solvent, chlorinated         |
| 14. Bilge water            | 39. Ink sludge           | 64. Solvent, hydrocarbon         |
| 15. Blasting sand          | 40. Ink wastewater       | 65. Solvent, oxygenated          |
| 16. Capacitors, PCB        | 41. Laboratory chemicals | 66. Solvent, mixed               |
| 17. Catalyst               | 42. Lime sludge          | 67. Spill cleanup residue        |
| 18. Chemicals, unused      | 43. Machine tool coolant | 68. Strerford solution           |
| 19. Containers, empty      | 44. Machining waste      | 69. Sulfide sludge               |
| 20. Contaminated equipment | 45. Metal dust           | 70. Sump/lagoon sediment         |
| 21. Contaminated soil      | 46. Oil                  | 71. Tank bottom sediment         |
| 22. Cyanides               | 47. Oil sludge           | 72. Tanning sludge               |
| 23. Detergent              | 48. Oil & water          | 73. Tetraethyl lead sludge       |
| 24. Distillation bottoms   | 49. Paint sludge         | 74. Transformers, PCB            |
| 25. Drilling mud           | 50. Pesticides           | 75. Waste water treatment sludge |
|                            |                          | 76. Others (Specify in Item 6)   |

**Item 7:** If the waste is extremely hazardous, provide the State extremely hazardous permit number.

**Item 8:** Indicate the process, activity, or operation which generated the waste. (Examples: aircraft cleaning, insulation stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

**Item 9:** Information must be provided in this item. Do not leave blank. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide.) Provide the approximate concentration of nonhazardous material.

**Item 10-11:** Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (eg: toxic and corrosive) check all appropriate boxes (eg: toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

**Item 12:** Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special hazards or precautions should also be noted. (Example: Sulfide solution will generate toxic gas if mixed with acids.)

**Item 13:** Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. It is unlawful for a transporter who is not the generator to sign Item 13.

**Transporter:**

**Item 1:** Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The last six digits may be any convenient combination of digits (eg: sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period. (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986.)

**Item 14:** Enter company name, address, telephone number and EPA I.D. number.

**Item 15:** Indicate the date and exact time the waste was removed from the generator's facility.

**Item 16:** Sign the manifest upon receipt of the shipment and indicate the date signed.

**TSD Facility Operator:**

**Item 17:** Provide the TSD facility name, EPA I.D. number and telephone number.

**Item 18:** If the quantity of waste is measured or estimated at the TSD facility (eg: weighed), indicate the quantity.

**Item 19:** If the waste is applied to the land (eg: surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

**Item 20:** Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Example: Differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40CFR 264.72.

**Item 21:** Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method. (Examples: neutralization, incineration, oxidation).

**Item 22:** If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the interim transfer station facility, shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

**Item 23:** Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send number 1 copies of the manifest (original) on a monthly basis or as otherwise required to DOHS. If wastes are received from interim storage or transfer activities, the final TSD facility shall send to DOHS copy number 1 of each master manifest with copies of all original manifests stapled to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facility operators.

UNIFORM HAZARDOUS WASTE MANIFEST

TANK 7

STATE ID NUMBER **83052412**

Please print or type with ELITE type (12 characters per inch).

GENERATOR NAME AND MAILING ADDRESS DOUGLAS AIRCRAFT COMPANY 190th & NORMANDIE TORRANCE, CA. 90502 AREA CODE/PHONE NUMBER (213) 533-7612					MANIFEST DOCUMENT NUMBER				
TRANSPORTER NO. 1 IT TRANSPORTATION 221 EAST "D" STREET WILMINGTON, CA. 90744					VEH./CONTAINER NO. <i>88417</i>		EPA ID NUMBER CIAID02966489		
TRANSPORTER NO. 2/ALTERNATE TSD FACILITY KETTLEMEN HILLS 2210 S. AZUSA AVE. WEST COVINA, CA.					VEH./CONTAINER NO.		EPA ID NUMBER CIAID00064611		
TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY IT - HARBOR DIVISION 221 EAST "D" STREET WILMINGTON, CA. 90744 AREA CODE/PHONE NUMBER					VEH./CONTAINER NO.		EPA ID NUMBER CIAID02965489		
PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS			UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	WASTE CAT. NO.	DIS ME	
ACID LIQUID, N.O.S. CORROSIVE			NA1171610	126100	G	11CIT	1120		
COMPONENTS					CONC. RANGE		UNITS		
					UPPER	LOWER	%	PPM	
1. CHROMIC ACID					12		%		
2. SULFURIC ACID					6		%		
3. HYDROFLOURIC ACID					1		%		
4. WATER					81		%		
SPECIAL HANDLING INSTRUCTIONS GLOVES, GOGGLES, RESPIRATOR - MAY CAUSE SEVERE BURNS.									
This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.									
Printed or typed full name and signature DOROTHY STOUT <i>Dorothy Stout</i>							MO.	DAY	YR.
							015	019	813
<input type="checkbox"/> Check if continuation sheet is used. Number of continuation sheets									
TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES					DATE REC'D & ACCEPTED	MO.	DAY	YR.	
<i>Bill Banks</i> Printed or typed full name and signature <i>Bill Banks</i>									
TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES					DATE REC'D & ACCEPTED	MO.	DAY	YR.	
DISCREPANCY INDICATION SPACE <i>3000 Gal, not 2000 Gal.</i>									
Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD/F must complete waste number. See instructions.					EPA ID NUMBER	DATE RECEIVED & ACCEPTED	MO.	DAY	YR.
<i>Tom Hancock Jim Harwood</i> Printed or typed full name and signature					CAD00004899		6	9	83

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TO BE FILLED IN BY

TSD/F SENDS THIS COPY TO DOHS WITHIN 15 DAYS